Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

F-5235 CIP DIV

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			13					RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00
то	TAL CHARGEA	BLE CLAIMS	/ / minus 20=		*			X\$ 9=		OR	X\$18=	
INC	EPENDENT CI	AIMS) minus 3 =		•			X40=		OR	X80=	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=	
* If	the difference	in column 1 is	ess than zero, enter "0" i			olumn 2		TOTAL		OR	TOTAL	210-
Claims as amended - Part II									9	OTHER		
(Column 1) CLAIMS			<u> </u>	(Colur				SMALL E	·	OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	CLAIM	=	$\ \ $	X40=		OR	X80=	
<u> </u>	rino i raese	INTATION OF INIC	DERIFLE DE	ENDENT	CLAIIVI			+135=		OR	+270=	
							l	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,						
AMENDMENT B	emperature and the second seco	CLAIMS REMAINING AFTER AMENDMENT	•	HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=			+270=	
								TOTAL		OR	TOTAL	
ADDIT. FEE ADDIT.											ADDIT. FEE	
	, - , - , - , - , - , - , - , - , - , -	(Column 1) CLAIMS	γ	HIGH	EST	(Column 3)) 		ADDI		ا	400
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMI PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	ADDI- FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=				
٠,	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=	
**	f the "Highest Nui	mber Previously Pa mber Previously Pa	id For" IN THIS	SPACE is	s less than	n 20, enter "20.	·" A	TOTAL ADDIT. FEE		OR ,	TOTAL ADDIT. FEE	
	The "Highest Num	ber Previously Pai	d For" (Total or	Independe	ent) is the	highest number	er fou	nd in the appi	opriate box	in col	umn 1.	